

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	/						51		/
2		/					52		/
3		/					53		/
4		/					54	/	
5		/					55		/
6		/					56		/
7		/					57	/	
8		/					58		/
9		/					59		/
10	/						60		/
11		/					61	/	
12		/					62	/	
13	/						63		/
14		/					64		/
15		/					65	/	
16		/					66		/
17	/						67		/
18	/						68		/
19		/					69	/	
20		/					70		/
21	/						71		/
22		/					72	/	
23		/					73	/	
24		/					74		/
25	/						75	/	
26		/					76	/	
27		/					77		/
28	/						78		/
29	/						79		/
30		/					80	/	
31		/					81	/	
32	/						82		/
33		/					83		/
34		/					84	/	
35		/					85		/
36	/						86		/
37	/						87		/
38		/					88	/	
39		/					89	/	
40	/						90		/
41		/					91		/
42		/					92		/
43		/					93		/
44	/						94		/
45	/						95		/
46		/					96		/
47		/					97		/
48		/					98	/	
49		/					99		/
50		/					100		/
TOTAL IND.	←		←		←		TOTAL IND.	←	
TOTAL DEP.	←		←		←		TOTAL DEP.	←	
TOTAL CLAIMS	←		←		←		TOTAL CLAIMS	←	

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	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	/						51	/					
2		/					52		/				
3		/					53		/				
4		/					54	/					
5	/						55	/					
6	/						56		/				
7		/					57		/				
8		/					58	/					
9	/						59	/					
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11		/					61		/				
12		/					62		/				
13	/						63		/				
14		/					64	/					
15		/					65	/					
16	/						66		/				
17	/						67		/				
18		/					68		/				
19		/					69		/				
20	/						70	/					
21		/					71		/				
22		/					72		/				
23		/					73		/				
24	/						74	/					
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31		/					81		/				
32	/						82		/				
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35		/					85		/				
36		/					86	/					
37		/					87	/					
38		/					88		/				
39		/					89		/				
40		/					90		/				
41	/						91	/					
42	/						92	/					
43		/					93		/				
44		/					94		/				
45		/					95		/				
46	/						96	/					
47	/						97	/					
48		/					98		/				
49		/					99	/					
50		/					100	/					
TOTAL IND.	↙		↙		↙		TOTAL IND.	↙		↙		↙	
TOTAL DEP.	↘		↘		↘		TOTAL DEP.	↘		↘		↘	
TOTAL CLAIMS							TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE						
							APPLICANT(S)							
CLAIMS														
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			*		*		*		
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	
201	/						51							
202		/					52							
203	/						53							
204		/					54							
205	/						55							
206		/					56							
7							57							
8							58							
9							59							
10							60							
11							61							
12							62							
13							63							
14							64							
15							65							
16							66							
17							67							
18							68							
19							69							
20							70							
21							71							
22							72							
23							73							
24							74							
25							75							
26							76							
27							77							
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30							80							
31							81							
32							82							
33							83							
34							84							
35							85							
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37							87							
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40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.		67					TOTAL IND.							
TOTAL DEP.		138					TOTAL DEP.							
TOTAL CLAIMS		206					TOTAL CLAIMS							